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Assessment of the Chief's Principal Representative (CPR) Program

THESIS/REPORTS

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ASSESSMENT OF THE

CHIEF'S PRINCIPAL REPRESENTATIVE (CPR) PROGRAM:

A PRELIMINARY FINDINGS REPORT

February 1, 2008

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INTRODUCTION

Efforts to contain USDA Forest Service fire suppression expenditures gave rise to a new program for large fire guidance and oversight in 2007. During the 2007 fire season, the agency implemented a system that assigned a Chief's Principal Representative (CPR) on all fires exceeding $10 million or fires designated "of national significance" prior to reaching that financial threshold. Additionally, a system of regional oversight was established for all fires over $5 million. These systems were designed to provide more management control, oversight, and accountability over fire management in an attempt to gain control of rising suppression expenditures, which have severely hampered agency programs in other areas.

Headquarters staff identified a need to document how this new system was actually implemented, its effects on decision making and resource allocation, and how these changes were perceived, both by those affected (including agency administrators and incident management teams), as well as those serving in a guidance role (CPRs and regional oversight teams). We conducted this assessment in response to that need. Throughout the assessment, we made every effort to accurately ascertain and record the experiences and impressions of those interviewed about the CPR process, avoiding conjecture and interpretations from the researchers. Additionally, we obtained these interviewees' experiences and impressions of 1) new products and tools delivered through the Wildland Fire Decision Support System (WFDSS) and 2) other management efficiencies recommended by the Chief to address large fire cost issues (see *Management*

Efficiencies Master List 2006, available at: http://www.nafri.gov/pages/imm.htm). To ensure timely input to fire managers currently preparing for the 2008 fire season, this report offers only preliminary findings from our assessment and does not discuss the WFDSS products and other management efficiencies. More detailed reports will be provided once we have completed our final analysis.

OBJECTIVES

Our purpose was to understand how the CPR process affected decision making on large wildland fires during the FY 2007 wildland fire season. Specific research questions we addressed included:

- How do the new policies work from the standpoint of agency administrators? What are the benefits, problems, and issues?
- How do the new policies work from the standpoint of incident management teams (IMTs)? What are the benefits, problems, and issues?
- How does the new process and/or the presence of the CPR or Regional oversight affect interactions and communication with local community leaders? What are the benefits, problems, and issues?
- How do the new policies work from the standpoint of those involved in the oversight roles (CPRs, and regional oversight teams)? What are the benefits, problems, and issues?

- Does the presence of a CPR or Regional representative result in modified suppression strategies? If so, what are the effects?

METHODS

We used a qualitative research approach to gather information for this assessment. This offered us the best means of obtaining an in-depth understanding of participants' experiences with and impressions of the CPR process.

In-depth interviews were held with CPR process participants during the 2007 fire season. To obtain our interviewees, we used "snowball sampling," where study group members suggest interviewees to ensure researchers obtain a good mix of information. Of those suggested for this study, we selected 24 individuals (AAs, ICs, fire spread/values at risk data analysts, and CPR team members) who experienced CPR implementation on one or more of 14 CPR fire events in several states. Interviews were confidential, open-ended, conversational style discussions lasting about one and a half hours each. We used a discussion guide to ensure the conversations included topics pertinent to our research objectives. All interviews were tape recorded and professionally transcribed.

Thus far our analysis, which serves as a basis for this report, has entailed coding the transcripts in terms of noteworthy themes and their distinctive features. Please see Appendix A for a more detailed discussion of our methods.

BACKGROUND ON THE CPR PROGRAM

The Chief's Principal Representative (CPR) Program is one of 49 management efficiencies developed by the Forest Service in fall 2006 to help reduce large fire costs. There are three categories of management efficiencies—leadership, operations, and management. The CPR Program falls within the leadership category. Leadership management efficiencies are actions that may be taken to support sound decision-making processes and management controls that can potentially contribute to cost reductions. CPR positions are filled by high level line officers assigned by the Chief to wildland fire events and delegated authority to provide direct oversight on incidents of national significance. CPR Program objectives include 1) sharing risk and providing decision support, 2) improving national oversight on certain fires, 3) conservation of resources from the start of the fire season, and 4) applying a more national perspective to resource allocation. (see *Concept Paper: Chief's Principal Representative* n.d., available at: http://www.nafri.gov/pages/imm.htm). As originally envisioned, CPR roles and responsibilities included 1) assisting in the development of the delegation of authority for incident management teams, 2) reviewing and providing oversight to the development of the wildfire situation analyses (WFSAs), and 3) challenging incident management teams and local leadership to develop and execute more effective incident management. Where necessary, the CPR would have authority to act on behalf of the fire event's local agency administrator to achieve a greater national goal. The CPR would be supported by a small staff skilled in such functional areas as liaison, public information, safety, fire operations, planning support, and financial management.

Our study team was charged with examining how the CPR process was actually inaugurated on the ground during the 2007 fire season through the eyes of those that experienced it. The following sections summarize some preliminary findings from our interviews with agency administrators, incident commanders, and CPR team members to document their perspective on this new program's inaugural operations and effects.

PRELIMINARY FINDINGS ON THE CPR PROGRAM

Implementation Practices

CPR process implementation began with a high-level Forest Service line officer being selected as CPR for a particular fire event. This individual subsequently received a letter containing their delegation of authority (DOA) and general instructions (Please see sample DOA letter in Appendix B).

Assisted by Washington Office (WO) Fire and Aviation Management (FA&M) staff, each CPR selected a support team. With the exception of one instance we heard about, the CPR team then traveled to their assigned destination to implement oversight at a fire, complex, or GACC level. During their stay, the team generally operated in the following way:

- Assessed their fire event(s) at a distance, observing without being in the thick of battle.
- Played an indirect role in fire management.

- Interviewed key agency administrators (AAs) and incident commanders (ICs) to obtain their perspectives on event management.
- Asked the following kinds of questions:
    - How was the receiving (host) unit making decisions?
    - How was the receiving unit allocating resources?
    - What was driving AA/IC resource allocation decisions?
    - What were the receiving unit's challenges?
    - What recommendations did the receiving unit have for the CPR?
- Used answers to the preceding questions to:
    - Obtain information about how the event decision-making system was working.
    - Relay this information to the WO to assist in making appropriate decisions about future policy.
- Observed management activities.
    - Received information about objectives, strategies, and tactics being used that members of the team could take back to their own jobs.
    - Explored the role of private property asset protection in determining suppression strategies (See OIG Audit Report 2006 at: http://www.usda.gov/oig/webdocs/08601-44-SF.pdf).
- Conveyed to local units that the CPR and his team:
    - Were on site to help local managers reinforce that the agency is serious about containing costs.
    - Were **not** on site to perform an inquisition.

- Provided a draft narrative to the WO, documenting CPR findings and recommendations.

Implementation Benefits, Challenges, and Issues

The CPR process provided various benefits, challenges, and issues to its participants. We report those most frequently mentioned in the next three sections.

Benefits. Although benefits were variously interpreted, interviewees generally agreed the new CPR process accomplished the following:

- Raised AA/IC cost containment consciousness and/or reinforced/demonstrated their existing commitment to it:
    - Many AA and IC interviewees said they were already highly cost conscious pre-CPR arrival.
    - AA/IC interviewees demonstrated they were already using appropriate management response (AMR), that is, a policy that provides maximum flexibility to AAs/ICs in selecting effective/efficient fire management strategies and tactics commensurate with values at risk. Each interviewee insisted the 2007 fire season was so severe that AMR typically consisted of point protection alone. Here, fire managers develop management action points (MAPs) that trigger suppression actions when the advancing fire threatens high value resources, such as threatened and endangered (T&E) species habitat, structures, and private property.

- Motivated AAs/ICs to welcome and willingly listen to the CPRs because they avoided being "big stick wielders":
    - The original program formulation of CPRs potentially taking command of, or significantly influencing, fire management planning and operation did not happen on any of the events experienced by our interviewees.
- Educated CPRs about wildland fire management:
    - CPRs, selected from a pool of Regional Foresters, Station Directors, and WO Program Directors/Deputies, typically had very little field-level fire management background/expertise. (However, at least one team member on each CPR team was a seasoned, highly respected fire manager.)
    - CPRs and most team members came to understand the complexities and challenges faced by AAs/ICs responsible for managing large, lengthy-duration, rapid- and intense-burning wildland fires.
    - CPR interviewees themselves acknowledged their assignment was a great learning experience; during their assignment, they came to realize how complex and difficult managing "mega" wildland fires really is. For example, each fire visited had a different decision space around it, meaning CPRs had to evaluate how well AAs/ICs managed within their respective decision spaces.
- Utilized the CPR team's high level of expertise:

- CPR interviewees thought their main contribution consisted of applying their policy expertise in assessing AA/IC management effectiveness/efficiency.
- To accomplish the "nuts and bolts" assessment of AAs/ICs' effectiveness in fire event decision making, CPRs relied heavily on their team (CPR) members' technical expertise.

- Identified systemic/root problems with the agency-wide fire management organization:
  - CPRs, as well as many other interviewees, concluded that if the agency is to efficiently and effectively manage today's mega fires, it must resolve some systemic/root problems at the national level. Examples include re-evaluating standards for "mop-up," developing consistent policies for structure protection, resolving duration of assignment issues, clearing up certain contracting issues, and reviewing the efficiency and effectiveness of the National Multi-Agency Coordinating (MAC) Group.
- Validated/affirmed AA/IC efforts to achieve management effectiveness/efficiency:
  - AA/IC interviewees appreciated CPR teams' validation, affirmation, and understanding of host unit decision making practices and challenges relative to nationally significant fire events.
  - Pre-fire season 2007, many AA/IC interviewees perceived prospective CPRs as threats, because pre-season CPR briefing papers indicated

CPRs possessed authority to preempt AA/IC decisions, and even take command of the event, if warranted. In actuality, CPRs visited fire events; gathered information; tried to understand the how, why, and wherefore of AA/IC decision making; offered "have you thought about this" kinds of questions for consideration; acted as sounding boards; and shared their findings both vertically and horizontally within the agency.

  - Many interviewees believed CPR team findings motivated the latter's willingness to intercede, on behalf of AAs/ICs, with the Washington Office (WO), OMB, and Congress. A review of several draft CPR reports corroborates interviewees' perceptions of CPRs as intercessors.
  - AAs/ICs typically opened up to CPR teams and worked hard to solicit their thoughts and advice.

- Confirmed that in virtually every case the big strategy driver was protection of private assets and that protection of natural resource values on public lands was not usually a major force driving expenditures.
- Reinforced national emphasis on cost effective fire suppression by virtue of their visiting fire events and looking at suppression activities.

Challenges. Interviewees discussed numerous challenges and issues associated with the CPR program:

- Scale of assignment: Should CPRs be assigned at the event level or the area (GACC) level? Good arguments were made to support either practice. In

2007, CPRs were used mostly at the GACC level rather than on individual fires. Where CPRs were assigned at the GACC level, some AAs/ICs had no opportunity to meet CPRs face-to-face and utilize their services. However, the numerous "mega" fires and complexes burning in the West, as well as severe resource shortages, made a bird's eye view of the entire wildland fire management operations area appear a better use of CPR services.

- Close-knit, collegial Regional Forester leadership group: Some interviewees believed Regional Forester CPRs may be uncomfortable executing heavy-handed assessments of their colleagues' decision making practices.
- CPR fire experience: CPRs faced a steep learning curve because most had very limited on-the-ground fire experience/expertise. However, interviewees thought that Regional Forester CPRs' home Regions will benefit in the long run because their administrators can apply their new-found fire management experience/understanding to problems in their home Regions.
- Silver bullet solutions: Many interviewees thought the Forest Service has been looking for a "silver bullet" solution to fire suppression cost containment, with the CPR process just another attempt at this.
    - These same AAs/ICs suggested the real culprits behind fire cost escalation are climate change, unnatural fuels buildup, and rapid development in the wildland urban interface (WUI). Much of the time, these conditions render cost-containment efforts in large wildfire suppression a difficult to almost impossible task. Such conditions are making it almost impossible to effectively manage escaped large fires,

regardless of how many management efficiencies the agency promotes.

- Some interviewees suggested the agency needs to resume active management of its National Forest lands to attain significant fire cost reduction.

Issues. Many issues were raised by interviewees concerning the CPR Program itself. Treating each of these separately is beyond the scope of this report and will be done in our subsequent final report. Following is a summary of key issues mentioned:

- CPR/CPR team role ambiguity: Most interviewees asserted the role of a CPR and their respective team members was not well-thought-out or defined. CPR role expectations were confusing to host unit managers, IMTs, and even CPR teams themselves. Consistency of documentation outlining CPR roles/responsibilities was lacking. CPR role expectations varied/even conflicted, depending on the policy document one consulted.
- CPR process training: Most interviewees reported that pre-2007 fire season training for CPR program participants was largely absent. Neither CPRs nor AAs/ICs received sufficient training to adequately understand and use the new program's services. Each CPR team devised its own protocol of operation. In some cases, CPRs, AAs, and ICs actually sat down together to figure out what the CPR's role was and how the three sets of players could most effectively interact to meet the CPR Program's

intent. Letters of authority delegation sent to CPRs provided only general direction concerning their responsibilities (See first paragraph under previous section entitled "Implementation Practices".) Interviewees interpreted the delegation letter contents as mandating mostly a fact-finding and reporting set of responsibilities for CPRs.

- Timeliness of CPR team arrival and departure: Most interviewees stated that CPR team visits were not sufficiently timely to affect strategy, politics, and associated fire costs. This issue is tied to a need to decide whether CPRs are expected to influence initial strategy or enter events midway to validate or countermand existing strategies. Most interviewees felt that significant cost savings could only be attained by CPR team visits if the team arrived at the time initial strategy was being formulated. However, if one objective of a CPR visit is to gather information for future policy decisions, some interviewees agreed there was a need for a high level official (that is, Regional Forester) in that capacity and that a visit at any time during the incident would work.
- Trigger points for ordering CPRs: Some suggested there are different trigger points for assigning CPRs ($5 million and $10 million) than there are for officials signing off on WFSAs (up to $2 million for District Rangers, $10 million for Forest Supervisors, $50 million for Regional Foresters, and over $50 million for the Chief or Deputy Chiefs. Figures taken from *Forest Service Manual*, available at: http://www.fs.fed.us/fire/wfsa/5130.pdf). These interviewees thought that

efficiency could be improved by consolidating these two trigger point sign-off processes.

- Host unit overload from increasing numbers of review teams: Interviewees are concerned that each year more and more cost effectiveness teams/panels/reviewers are descending upon large wildland fires—some even arriving in the "heat of battle"—creating significant impacts on host units' and IMTs' time and energy. This stacking of review teams highly impinges on the work of those managing volatile, rapidly moving fire events.
- Role of cooperators in the CPR process: The interviewees thought that CPRs had little effect on agency cooperators and local politics. Some interviewees believed the CPR process will be unsuccessful unless Forest Service cooperators, including state and local government, are part of the process.
- Process of selecting AAs/ICs visited by CPR teams: Not all AA/ICs had the opportunity to interact with CPR team members. Those who did not were disengaged from the process, least understood it, and benefited least from it.
- Composition of CPR teams: Interviewees observed that in the busy 2007 fire season and because of other pressing agency business, there seemed to be a limited number of individuals qualified to be CPRs or team members. In their view, this lessened effectiveness of the CPR process. For example, some fires were not assigned CPRs until their managers had expended

considerably more money than the $10 million established as a trigger point for CPR assignment.

- CPR's presence/absence at community meetings: Interviewees reported that CPR team members had no presence at community meetings led by AAs/ICs. Without communities buying into the CPR process, AAs and ICs get caught in the middle. The CPR process was designed in part to share AAs/IMTs' burden of responding to community concerns evoked by AMR policy. However, AAs/ICs have no recourse when community members vent their frustrations, because the CPR team has left town/never been to a given town. The AA is left alone to handle potentially serious and lasting public relations problems that may have erupted in response to direction from a CPR to AAs/ICs.
- Selection of CPRs from the organizational hierarchy: The policy of selecting CPRs from higher levels of the organization was debated by interviewees. Some interviewees had the impression that it gave high level officials first hand understanding of what event managers on the ground faced. Others thought high-level leaders might have somewhat intimidated AAs/IMTs, keeping them from being frank and open about the issues they were grappling with. Some also reported that high-level leaders selected as CPRs had very busy schedules that were filled up months in advance. These interviewees said CPR schedules limited CPR flexibility in terms of their arrival time and duration of stay at events. This in turn limited interviewees' accessibility to CPRs. At best, many interviewees reported

that a CPR's event visit gave him/her a cross section/slice-in-time view of what happens in the decision making/operations arenas of fire events.

- State employee/other agency/community response to AMR: Interviewees observed that state agencies typically have a full suppression mandate so are frequently negatively impacted by the Forest Service's AMR policy. State managers and community members view AMR as a "let it burn" strategy, which wastes valuable natural resources and/or threatens grazing lands that support ranching operations. Some interviewees believed CPRs could play a useful role in negotiating situational appropriateness of an AMR-type strategy and obtaining buy-in from partners and impacted local government and community members. Others believed the CPR could assist when (or if) local incident management decisions were questioned from above in the agency or department.
- CPR team written feedback is often not reaching affected AAs/ICs in a timely fashion (if at all).

Risk Taking Related to Safety and Cost-Containment Considerations

When asked about the CPR process's effect on AA/IC risk taking and safety considerations, most interviewees said the process had no effect. Still, most AAs reported they felt CPRs supported or validated management actions. Most saw little evidence of risk management being shared by CPRs who came to an event after it was well underway, stayed for about a week or less, and left. A few interviewees suggested CPR policy makers need to define what they mean by having CPRs share risks with AAs/ICs.

Many contentious events (for example, loss of grazing allotments) can occur on large fires if AAs/ICs take risks to reduce suppression costs. Some interviewees thought it would be helpful if CPRs could be on site to 1) listen to an impacted party's tale of loss and stand behind the AA/IC, whose cost cutting strategies and tactics may have influenced the losses, and 2) mitigate threatened litigation efforts and public dissatisfaction associated with cost cutting decisions.

CPR Role

We asked each interviewee to sum up their experience with the CPR process by defining what role CPRs played on their respective fires. Virtually all AAs/ICs used terms like validation, fact finding, information gathering, advisory, and learner. Other roles mentioned included "have you considered this" questioning, collegial support, liaison with the WO, and oversight (only in the sense of looking over their host's shoulder to understand the AA/IC decision making process). Virtually all interviewees stated that CPR role definitions need to be more structured, specifying expected CPR activities and report requirements.

Suppression Cost Impacts

Virtually all interviewees stated that the CPR process had no effect on their fire event's suppression expenditures. This was due in part to the fact that CPRs arrived too late in the event to influence selection of initial strategy and tactics. At best, CPR teams reinforced the agency's commitment to cost reduction for fire suppression, while validating AAs'/ICs' efforts at cost containment and AMR practices.

Ultimate Effects on Incident Management

Although the CPR process reportedly did not noticeably improve fire management efficiencies in 2007, at least some interviewees believed it could generate improvements over time. For example, some interviewees said CPRs reinforced AMR strategy as an appropriate practice and one that should be institutionalized. They also said CPRs daylighted the issue of structure protection vividly to the WO because they witnessed the problem first hand. The CPR team's value appeared to be more strategic; for example, they raised policy questions that could make a difference in future cost containment efforts. The CPR concept also helped with tech transfer/learning among Forest Service Regions. Although candor may have been influenced by using Regional Foresters, some interviewees also said that selecting Regional Foresters as CPRs could elevate key policy issues up the chain of command more rapidly than if the questions migrated from on-the-ground managers up through the fire organization ranks to the Chief. The CPRs interviewed said they could not claim to have affected costs in '07. However, they thought their work would influence future cost containment efforts.

RECOMMENDATIONS

Interviewees acknowledged there is a need to decide whether the CPR program should be continued in 2008. If it is continued, they recommended the following:

- Conduct a training meeting or conference with potential CPR candidates present.

- Review 2007 CPR-related successes/failures with potential CPR candidates.
- Assign line officers who are new/less experienced in fire to some "learner" positions on CPR teams, so they can develop an understanding of how to manage their own potential nationally significant/mega events.
- Provide potential CPR candidates clear policy on the timing/duration of event visits. This includes defining whether CPRs are to assist with decision making at the fire event's front end or help later on after an event's trajectory has been plotted. If the latter, CPRs' decision space to affect strategies may be narrower or limited to verifying and/or supporting AA/IC daily decisions rather than changing basic incident trajectories. If CPRs are to be effective in helping AAs with initial strategy selection, they must arrive shortly after an incident enters the extended attack phase.
- Establish policy regarding CPR function. Will CPRs have command, oversight, and/or advisory functions?
- Discover whether selecting a Regional Forester CPR affects host unit managers' candor in describing sensitive issues they grapple with.
- Reconcile policy conflicts among: 1) the Administration's fire cost containment mandate, 2) protection of structures and lands within the wildland urban interface (WUI), and 3) state and local entities' fire suppression and land use policies/ regulations that permit infrastructure, housing, and other human-related activities to develop in fire prone areas.

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APPENDIX A

To document implementation of the new Chief's Principal Representative (CPR) system and its effects, we employed a qualitative research approach. In this approach "researchers study things in their natural settings, attempting to make sense of, or interpret . . . [those things] in terms of the meanings people bring to them" (Denzin and Lincoln, 1998, p. 3). This approach offered us the best means of obtaining an in-depth description and understanding of CPR Program participants' experiences and impressions of/with Program implementation. Future revisions to the Program need to be informed by how its 2007 implementation affected on-the-ground people who experienced it.

Qualitative research uses a variety of methods, including in-depth interviews, to discover and describe the meanings of things studied to affected group members in those people's own terms. We gathered information on the experiences of individuals who participated in 14 fire events to which a CPR was assigned in 2007. These events occurred in Oregon, Idaho, Northern and Southern California, and Montana. Our data was collected from 24 in-depth interviews with fire event stakeholders associated with and/or affected by the assigning of a CPR.

We began with a pilot interview of a National Forest agency administrator to obtain his views on how he anticipated the CPR process would work and what outcomes he expected. Knowledge gained from this initial interview informed development of a "living" discussion (interview) guide that was continually revised to facilitate ongoing grounding and validation of emerging findings.

Because we believed it was vitally important that our researchers not exacerbate the chaos associated with a fire event by attempting to schedule interviews too soon after the host unit resumed control of it, we waited a few weeks to begin the process. In the interim, we used an informal communication process with fire managers to obtain a sense of when and how best to implement our data gathering process.

Sampling and Interviewing

We used standard qualitative research methods to select interviewees that would provide an in-depth understanding of the study questions enumerated above. We believed that responses could vary according to fire location, so we maximized the geographic dispersal of CPR fire events sampled within our time and funding constraints. Where feasible, we used "snowball" sampling (also known as sociological sampling) to select our interviewees. Snowball sampling assumes members of the society one is studying "are the very best source of information on how to put together an empirically grounded, representative sample of that society" (Gold 1997). In this sampling method each interviewee is asked to identify others they know are good representatives of the social groups and points of view pertinent to one's research. Accordingly, we asked eight individuals, who were highly knowledgeable about incidents assigned CPRs, to recommend agency administrators, incident commanders, and CPR team members for us to interview.

Based on this input, we conducted in-depth, unstructured interviews with 24 persons associated with seven different CPR assignments in five GACCs (Geographic Area Coordinating Centers). Interviews were confidential, open-ended, conversational

style discussions, lasting approximately 1.5 hours. CPRs were assigned either to individual fires or to GACCs experiencing numerous large fires. When CPRs were assigned at the GACC level, they typically selected only a few of the ongoing fires within the GACC to visit on site. Altogether, interviewees represented 14 different fires that experienced CPR involvement. The typical mix of interviewees included an event's agency administrator, incident commander (IC), and in some cases, CPR and/or CPR team members. Our discussion guide was limited to eight general questions, reflecting the study's five objectives (research questions). Most interviews were done in the locality of the incident/fire event. Because of time constraints, flexibility was key.

Analysis

These interviews were tape recorded and professionally transcribed verbatim. Our analysis process involves careful study of transcribed interviews, coding the written text in terms of content categories (themes or topics) and their distinctive features (properties or characteristics).

Our objective is to perceive, understand, and report interviewees' empirical realities as they do. That means faithfully depicting the different stakeholders' realities using their terms and expressions, grounding reports in interviewees' own experiences. Where consensus is lacking, we describe the multiple perspectives identified and account for situations that deviate from the norm. Interviewees' confidence is protected through the use of coded identification. This preliminary report summarizes findings. Our final report and future publications will present findings in more detail, including representative quotations.

To validate our preliminary findings, we sent a draft of this preliminary report to all interviewees and asked them to confirm or disconfirm our understanding of their accounts of how the CPR process worked in their experience. We incorporated their comments into the final version of the Preliminary Findings Report found in front of this Appendix.

Currently, we are in the process of a more formal and detailed analysis of the transcripts. From this effort we will obtain a more in-depth understanding of interviewees' experiences with the CPR process. This detailed analysis is being assisted by The Ethnograph (1998), a qualitative data management computer program that facilitates the discovery of content categories and their distinctive features. Code words are attached to those categories and their respective features and retrieved for further analysis, sorting, and storing. This process greatly enhances our data interpretation and formulation of analytical conclusions about what patterns we have observed in interviewees' experiences with the CPR process.

APPENDIX B

Forest Service | **Washington Office** | **1400 Independence Avenue, SW Washington, DC 20250**

File Code: 1230/5100 **Date:** XXXX 2007

Route To:

Subject: Chief's Principal Representative -- XXXX NF

To: XXXX

You are assigned as the Chief's Principal Representative (CPR) for XXXX on XXXX .

As the CPR, you should:

- Provide a national perspective concerning this fire and how it fits within the overall fire situation.
- Review documents such as the Land Management Plan, Fire Management Plan, Wildland Fire Situation Analysis, and Delegation of Authority to ensure they are in alignment.
- Review documents from the Wildland Fire Decision Support System (WFDSS) used in the planning process.

- Provide a final narrative to include decisions and significant events, a discussion regarding alignment of strategic documents, cost management decisions, incident trends, and a rationale for actions.

/s/Kent P. Connaughton (for)

JAMES E. HUBBARD

Deputy Chief, State and Private Forestry